

FINAL PERFORMANCE REPORT
NORTH DAKOTA DEPARTMENT OF COMMERCE/DCS
 SFN 52344 (05/02)

CDBG FINAL PERFORMANCE REPORT			
RECIPIENT		INSTRUMENT NUMBER	
BUDGET/PROJECT PERIOD		PERIOD COVERED BY REPORT	
FROM (<i>Month, Day, Year</i>)	TO (<i>Month, Day, Year</i>)	FROM (<i>Month, Day, Year</i>)	TO (<i>Month, Day, Year</i>)
REPORT PREPARED BY		PHONE NUMBER	
PROJECT DESCRIPTION (DESCRIPTION MUST INCLUDE ANY CHANGES TO THE ORIGINALLY APPROVED DESCRIPTION)			
DID DISPLACEMENT OCCUR ON THIS PROJECT? IF YES, COMPLETE THE CIVIL RIGHTS COMPLIANCE REPORT FOUND IN THIS SECTION			<input type="checkbox"/> YES <input type="checkbox"/> NO
TYPE NAME CHIEF ELECTED OFFICIAL		TITLE	
SIGNATURE		DATE	
<p><i>DCS USE ONLY</i></p> <p>REVIEWED BY _____ DATE _____</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> SECOND PUBLIC HEARING <input type="checkbox"/> 504 SELF EVALUATION <input type="checkbox"/> ADAAG FORM </div> <div> <input type="checkbox"/> MINUTES TO PUBLIC HEARING <input type="checkbox"/> INCOME SURVEY FORMS </div> </div>			